

<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. HC-P02-060		
Application No. 10/772,090	Filing Date February 3, 2004	Examiner Z. C. Howard	Art Unit 1646		
Applicant(s): Baron et al.					
Invention: METHODS FOR MODULATING HEMATOPOIESIS AND VASCULAR GROWTH					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
<b>Total Claims</b>	6	- 56 =	0	x 60.00	0.00
<b>Independent Claims</b>	1	- 7 =	0	x 250.00	0.00
<b>Multiple Dependent Claims (check if applicable)</b> <input type="checkbox"/>					
<b>Other fee (please specify):</b> Extension for response within first month Supplemental Information Disclosure Statement					150.00
					180.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					<b>330.00</b>
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>18-1945</u> in the amount of \$ <u>330.00</u> .					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>18-1945</u> as described below.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
<u>/Melissa S. Rones/</u> Melissa S. Rones, J.D., Ph.D. Attorney/Agent Reg. No.: 54,408			Dated: <u>November 16, 2011</u>		
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